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USPTO FACSIMILE COVER SHEET

To: Commissioner for Patents
Fax Number: (571) 273-8300
Date: December 29, 2005
Pages: 21 pages (including this cover sheet)

MESSAGE:

Application No. 09/808,423
Examiner Natalie Pass
Art Unit 3626

Amendment Transmittal
Petition and Fee for Extension of Time
Amendment

(569.005)

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ERENCE & ASSOCIATES
Amendment Transmittal

Atty. Docket No. 569.005

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Gene E. Nacey
Serial No. : 09/808,423 Examiner : Natalie Pass
Filed : March 14, 2001 Group Art Unit : 3626
For : SYSTEM FOR COMMERCIAL FOOD MANAGEMENT

HON. COMMISSIONER OF PATENTS AND TRADEMARKS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

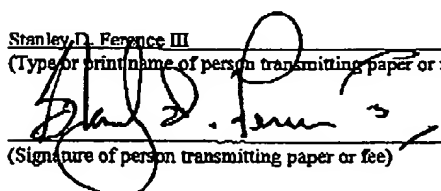
1. ☒ Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.
- OR
2. ☒ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. ☐ Small Entity status of this application has been established by a verified statement previously submitted.
4. ☐ A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF FACSIMILE TRANSMITTAL

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (571) 273-8300 on December 29, 2005 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III

(Type or print name of person transmitting paper or fee)


(Signature of person transmitting paper or fee)

Page 1 of 2

PERENCE & ASSOCIATES
Amendment Transmittal

Atty. Docket No. 569.005

5. ☐ Also enclosed: _____
6. ☒ No additional filing fee is required.
7. ☒ The filing fee has been calculated as shown below:

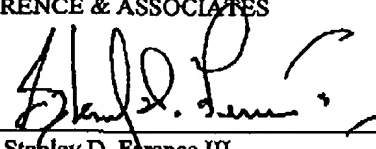
	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)			SMALL ENTITY					OTHER THAN A SMALL ENTITY	
						RATE	FEE				RATE	FEE
Total Claims	38	** 38	- *	0	x	\$9	-	O	x	\$18	-	
Ind. Claims	8	*** 8	- *	0	x	\$44	-	O	x	\$88	-	
<input type="checkbox"/> Multiple Dependent Claim Presented					+	\$150	-	O	+	\$300	-	
						TOTAL	- \$	O		TOTAL	- \$	

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.
- *** If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. ☐ Applicant encloses herewith a check for \$_____ to cover the filing fee.
9. ☐ The Commissioner is hereby authorized to charge the \$_____ filing fee to the credit card identified on the attached Credit Card Payment Form.
10. ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to the credit card identified on the Credit Card Payment Form accompanying the Petition for Extension of Time.

Respectfully submitted,

PERENCE & ASSOCIATES

By 
Stanley D. Ference III
Reg. No. 33,879

Dated: December 29, 2005

Mailing Address:

Customer No. 35195
PERENCE & ASSOCIATES
409 Broad Street
Pittsburgh, Pennsylvania 15143
(412) 741-8400
(412) 741-9292 - Facsimile

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